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APPLICANTS

Thomas A. Howell, Saratoga, CA;

\*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 10/099,500 03/13/2002 PAT 6,695,837 *PH 7-7-05*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*None PH 7-7-05*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 5	TOTAL CLAIMS 44	INDEPENDENT CLAIMS 11
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	EXAMINER'S SIGNATURE <i>[Signature]</i>	INITIALS <i>[Initials]</i>		

Verified and Acknowledged

ADDRESS

23371  
 CROCKETT & CROCKETT  
 24012 CALLE DE LA PLATA  
 SUITE 400  
 LAGUNA HILLS, CA  
 92653

TITLE

Power supply for identification and control of electrical surgical tools

FILING FEE  RECEIVED 992	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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